

ISSUT

REA (for additional cross references)

POSITION	LS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

Handwritten: 12/14/99, 32, 10008, 1-6-00

INDEX OF CLAIMS *2/17/00*

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral) ... Canceled A Appeal
÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	11/14/99
2	✓	✓	11/14/99
3	✓	✓	11/14/99
4	✓	✓	11/14/99
5	✓	✓	11/14/99
6	✓	✓	11/14/99
7	✓	✓	11/14/99
8	✓	✓	11/14/99
9	✓	✓	11/14/99
10	✓	✓	11/14/99
11	✓	✓	11/14/99
12	✓	✓	11/14/99
13	✓	✓	11/14/99
14	✓	✓	11/14/99
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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